PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10728568

		CLAIMS AS		•			SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS			(Column 1)		(Column 2)			TYPE [OR	SMALL	ENTITY
TOTAL CLAIMS			13					RATE -	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			\3 minus 20=		٠ ى			XS 9=		OR	XS18=	
INDEPENDENT CLAIMS			3 minus 3 =		· 0			X43≃		OR	X86=	
ML	ILTIPLE DEPEN	NDENT CLAIM PI	ESENT					+145=		OR	+290=	
• 11	the difference	in column 1 is	ess than zero, enter "0" in			olumn 2	L	TOTAL	385	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column								SMALL		OR	OTHER SMALL 8	
AMENDMENT A	A.	CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 13	Minus	- 2		= /		XS 9=		OR	X\$18=	
AME	Independent	• 3	Minus	*** (3 /			X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
	•	(Column 1)		(Colun	nn_2)	(Column 3)						-
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	ē	RATE	ADDI- TIONAL FEE
	Total	•	Minus	#		E		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	5****		=		X43=		OR	X86=	
_	FIRST PRESE	NTATION OF ML	ILTIPLE DEF	ENDENT	CLAIM		!	+145=			+290=	
								TOTAL		OR	TOTAL	
								DDIT. FEE		OR	ADDIT. FEE	
		(Column 1) -CLAIMS		(Colun		(Column 3)	٦ -			1		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		= .		X43=			X86=	
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ŀ	7402		OR	7.00-	
1. If the entry is applying 1 is loss than the entry is applying 2 units 10° is polying 2										OR	+290=	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE ADDIT. FEE TOTAL ADDIT. FEE												
		mber Previously Paid ther Previously Paid					er four	nd in the app	ropriate box	in col	lumn 1.	